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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NORTH CAROLINA	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Matthew First name Scott Middle name Webb Last name and Suffix (Sr., Jr., II, III)	Crystal First name Gail Middle name Webb Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5186	xxx-xx-9892

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Debtor 1 Matthew Scott Webb
Debtor 2 Crystal Gail Webb

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	702 Presnell Hollow Road Burnsville, NC 28714	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Yancey				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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	btor 1 btor 2	Crystal Gail Webb				_	Case number (if known)			
Pa	rt 2:	Tell the Court About \	Your Bank	ruptcy C	ase					
7.	Bank	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choo	choosing to file under		☐ Chapter 7						
			☐ Chapt	er 11						
			☐ Chapt	er 12						
			■ Chapt	er 13						
8.	How	you will pay the fee	abo ord a p	out how your er. If your re-printed	ou may pay. Typically, if you are r attorney is submitting your pay d address.	e paying the forment on your	e check with the clerk's office in your local court for more details fee yourself, you may pay with cash, cashier's check, or money in behalf, your attorney may pay with a credit card or check with			
					ly the fee in installments. If yo ee <i>in Installment</i> s (Official Form		s option, sign and attach the Application for Individuals to Pay			
			but app	is not red lies to yo	quired to, waive your fee, and mour family size and you are unab	ay do so only le to pay the	option only if you are filing for Chapter 7. By law, a judge may, y if your income is less than 150% of the official poverty line that if fee in installments). If you choose this option, you must fill out the (Official Form 103B) and file it with your petition.			
9.		you filed for ruptcy within the	■ No.							
		years?	☐ Yes.							
				District		When	Case number			
				District		When	Case number			
				District		When	Case number			
10.		nny bankruptcy s pending or being	■ No							
	filed not fi you,	by a spouse who is iling this case with or by a business er, or by an	☐ Yes.							
				Debtor			Relationship to you			
				District		When	Case number, if known			
				Debtor			Relationship to you			
				District		When	Case number, if known			
11.		ou rent your ence?	■ No.	Go to	line 12.					
	16210	GIICE !	☐ Yes.	Has y	our landlord obtained an evictio	n judgment aç	against you and do you want to stay in your residence?			
					No. Go to line 12.					
					Vos Fill out Initial Statement	About an Evic	iction, Judgment Against Voy (Form 101A) and file it with this			

bankruptcy petition.

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Debtor 1 Matthew Scott Webb

Deb	tor 2 Crystal Gail Webb)			Case number (if known)		
Part	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
	business:	☐ Yes.	Name	and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	e		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline: operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set applines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, state tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the prus. C. 1116(1)(B).				
	For a definition of small	■ No.	I am r	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?			
	identifiable hazard to public health or safety? Or do you own any						
	property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
					Number, Street, City, State & Zip Code		

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Debtor 1 Matthew Scott Webb
Crystal Gail Webb
Case number (if known)

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-10273 Doc 1 Filed 06/26/17 Entered 06/26/17 15:02:45 Desc Main Document Page 6 of 53

		Matthew Scott We Crystal Gail Webb		Document	r age o o	Case number (if known)		
Part		Answer These Questi		enorting Purnoses		·			
		kind of debts do	16a.		ner debts? Cons	sumer debts are define	d in 11 U.S.C. § 101(8) as "incurred by an		
	you h			individual primarily for a personal, family, or household purpose."					
				☐ No. Go to line 16b.					
				Yes. Go to line 17.					
			16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
				☐ No. Go to line 16c.					
				☐ Yes. Go to line 17.					
			16c.	State the type of debts you owe the	at are not consur	mer debts or business	debts		
17.	Are ye	ou filing under ter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.				
	after a	ou estimate that any exempt erty is excluded and	☐ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			ty is excluded and administrative expenses		
	admir	nistrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?			☐ Yes					
18.		How many Creditors do you estimate that you owe?	1 -49		□ 1,000-5,000		1 25,001-50,000		
			50-99		☐ 5001-10,000 ☐ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000		
			☐ 100-1 ☐ 200-9		_ 10,001 20,000		□ More than 100,000		
19.		ow much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estim be wo	ate your assets to orth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million		☐ More than \$50 billion		
20.		nuch do you	□ \$0 - \$	50,000	□ \$1,000,001		□ \$500,000,001 - \$1 billion		
	to be	ate your liabilities ?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			□ \$100,001 - \$500,000 □ \$500,001 - \$1 million)1 - \$500 million	☐ More than \$50 billion		
Pari	t 7: S	Sign Below							
For	you		I have ex	amined this petition, and I declare u	ınder penalty of p	perjury that the informa	tion provided is true and correct.		
				chosen to file under Chapter 7, I am tates Code. I understand the relief a			nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.		
				rney represents me and I did not pa tt, I have obtained and read the notion			an attorney to help me fill out this		
			I request	relief in accordance with the chapte	er of title 11, Unite	ed States Code, specifi	ied in this petition.		
bank				I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519					
			/s/ Matt	hew Scott Webb		/s/ Crystal Gail Wo			
				v Scott Webb e of Debtor 1		Crystal Gail Webb Signature of Debtor 2			
			Executed	June 26, 2017 MM / DD / YYYY		Executed on June MM / I	26, 2017 DD / YYYY		

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Debtor 1	Matthew Scott We	Document	Page 7 of 53		
Debtor 2	Crystal Gail Webb		Cas	e number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have e	xplained the relief ava	ilable under each chapter
•	not represented by ey, you do not need page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	rledge after an inquiry	that the information in the
		/s/ T. Bentley Leonard	Date	June 26, 2017	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		T. Bentley Leonard Printed name			
		Leonard & Moore PLLC Firm name			
		274 Merrimon Avenue Asheville, NC 28801 Number, Street, City, State & ZIP Code			

Email address

828-255-0456

Contact phone

5717Bar number & State

bentleyleonard@leonardandmoore.c

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		DOCUIII	eni Paue 8 01.53	
Fill in this infor	mation to identify your	case:		
Debtor 1	Matthew Scott We			
	First Name	Middle Name	Last Name	
Debtor 2	Crystal Gail Webl)		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF NORTH CAROLINA	
Case number				
(if known)				☐ Check if this i amended filin

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

ui	t 1: Summarize Your Assets		
		Your as Value of	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	146,640.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,615.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	166,255.0
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	63,965.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	320.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	1,039.0
	Your total liabilities	\$	65,324.00
⊃ar	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,134.29
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,095.0
⊃ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bousehold purpose "11 LLS C. & 101(8). Fill out lines 8-9g for statistical purposes. 28 LLS C. & 159		family, or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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		Document	Page 9 of 53	
	Matthew Scott Webb		3	
Debtor 2	Crystal Gail Webb		Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$	3,896.86
		1 -	•

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	320.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	320.00

	Case	17-10273	B Doc 1		06/26/17		.7 15:02:45	Des	c Main	
Fill in th	nis informatio	n to identify	your case and t			Page 10 of 53				
					•					
Debtor 1		st Name		lle Name		Last Name				
Debtor 2		rystal Gail		lle Name		Last Name				
	3,									
United S	States Bankrup	tcy Court for	the: WESTER	N DISTRI	CT OF NORT	TH CAROLINA				
Case nu	umber					-				if this is an ed filing
Schon each ca hink it fit nformation	ts best. Be as c	VB: Pr	coperty escribe items. List accurate as possil	ole. If two	married people	in asset fits in more than one a are filing together, both are e top of any additional pages	equally responsible	ofor supp	olying correc	ct
Part 1:	Describe Each	Residence, B	uilding, Land, or C	ther Real	Estate You Ow	n or Have an Interest In				
. Do you	u own or have a	ny legal or eq	uitable interest in	any reside	ence, building,	land, or similar property?				
Пла	Go to Part 2.									
_		. 0								
- res	s. Where is the p	property?								
1.1				What	is the property	/? Check all that apply				
70	2 Presnell H	lollow Road	t .		Single-family h		Do not deduct sec	ured clain	ns or exempt	ions. Put
Stre	eet address, if availa	able, or other des	cription		Duplex or mul	=	the amount of any Creditors Who Ha	secured of	claims on <i>Ścl</i>	hedule D:
					Condominium	or cooperative				
					Manufactured	or mobile home	Current value of t	ho	Current valu	uo of the
Bu	ırnsville	NC	28714-0000		Land		entire property?		portion you	
City	1	State	ZIP Code		Investment pro	operty	\$104,640).00	\$10	04,640.00
					Timeshare Other		Describe the natu			
				Who	nas an interest	in the property? Check one	a life estate), if kr		, ,	•
v				_	Debtor 1 only		Fee Owner			
	ncey			- 📙	Debtor 2 only					
Cou	arity				Debtor 1 and I	•	☐ Check if this		unity prope	rty
						f the debtors and another	(see instructions	i)		

Official Form 106A/B Schedule A/B: Property page 1

property identification number:

3BR, 1 bath; value shown is tax value

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Debt		attnew Scott Web rystal Gail Webb	OD			Case number (if known)	
	If you o	wn or have more	than one, list	here:			
1.2	,		,		is the property? Check all that apply		
_	•	Oak Drive		_ 🗆	Single-family home		d claims or exemptions. Put
	Street addres	ss, if available, or other des	cription		Duplex or multi-unit building		cured claims on Schedule D: Claims Secured by Property.
					Condominium or cooperative		, , ,
					Manufactured or mobile home		
	Burnsvi	lle NC	28714-0000		Land	Current value of the entire property?	Current value of the portion you own?
-	City	State	ZIP Code		Investment property	\$42,000.0	• • •
	•				Timeshare	Daniel de la contraction	
					Other		of your ownership interest tenancy by the entireties, or
				Who	has an interest in the property? Check o	- 116 4-4-1 16 los - 11	
					Debtor 1 only	Fee Owner	
	Yancey				Debtor 2 only		
-	County				Debtor 1 and Debtor 2 only	— Cheek if this is	
					At least one of the debtors and another	(see instructions)	community property
					r information you wish to add about thi erty identification number:	s item, such as local	
				4.6	acres vacant land inherited by	male debtor; adjoins	residence; tax
. Ca	rs, vans, No	trucks, tractors, sp			Schedule G: Executory Contracts and prcycles		
	Yes						
3.1	Make:	Chevrolet		Who has a	n interest in the property? Check one		d claims or exemptions. Put
	Model:	Cavalier LS		☐ Debtor	1 only		cured claims on Schedule D: Claims Secured by Property.
	Year:	2002		☐ Debtor	2 only	0	
	Approxim	nate mileage:	170000+	■ Debtor	1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info				one of the debtors and another		. ,
	4 door,	pwr. locks, wind	lows,				
	sunro	f; and 2000 Mitsu	ıbishi		if this is community property	\$6,050.0	96,050.00
		o Sport, 160000+		(see inst	ructions)		
		tly not running; re te, \$500.00	epair				
3.2	Make:	Chevrolet		Who has a	n interest in the property? Check one	Do not deduct secure	d claims or exemptions. Put
J.Z		K-10 pick-up		_			cured claims on Schedule D: Claims Secured by Property.
	Model: Year:	1978		■ Debtor	•		
		nate mileage:		☐ Debtor	2 only 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info			_	one of the debtors and another	ontile property:	portion you own:
		ning; junk vehicl		— ∧ι ισαδί	one of the debtors and another		
				Check i	if this is community property	\$100.0	0 \$100.00

Official Form 106A/B Schedule A/B: Property page 2

Case 17-10273 Doc 1 Filed 06/26/17 Entered 06/26/17 15:02:45 Desc Main Document Page 12 of 53 **Matthew Scott Webb** Debtor 1 Case number (if known) Debtor 2 **Crystal Gail Webb GMC** Do not deduct secured claims or exemptions. Put 3.3 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Sierra 1500 ☐ Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2003 Year: Debtor 2 only Current value of the Current value of the 170000+ Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another 4 WD \$9,425.00 \$9,425.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$15,575.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... refrigerator, stove, microwave, washer & dryer, misc. kitchen items, kitchen table, sofa, recliner, end table, queen bed, twin bed, toddler bed, 2 dressers, 2 chests of drawers, nightstand, armoire, \$2,400.00 air conditioner, gas grill, riding mower, misc. hand tools 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$600.00 2 TVs, DVD player, X-box, laptop computer, printer, 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms

Official Form 106A/B Schedule A/B: Property page 3

■ No

☐ Yes. Describe.....

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Case 17-10273 Doc 1 Filed 06/26/17 Entered 06/26/17 15:02:45 Desc Main Page 13 of 53 Document **Matthew Scott Webb** Debtor 1 Debtor 2 **Crystal Gail Webb** Case number (if known) 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$100.00 wedding bands 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$0.00 dog, 7 cats 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3.500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... joint checking & \$190.00 savings accounts Wells Fargo 17.1.

Local Government Federal Credit Union

Wells Fargo; not property of estate

joint checking &

savings accounts

custodial savings account for minor

\$70.00

\$100.00

17.2.

17.3.

child

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	ebtor 1 ebtor 2	Matthew Scott Webb Crystal Gail Webb	Case number (if known)	
18.		s, mutual funds, or publicly traded stock ples: Bond funds, investment accounts with	(S) h brokerage firms, money market accounts	
	■ No	,	, ,	
	☐ Yes.	Institution or iss	suer name:	
9.		ublicly traded stock and interests in inc	orporated and unincorporated businesses, including an interest i	n an LLC, partnership, and
	■ No	remare		
		Give specific information about them		
	00.	Name of entity:	% of ownership:	
	Negot	tiable instruments include personal checks,	negotiable and non-negotiable instruments , cashiers' checks, promissory notes, and money orders. ot transfer to someone by signing or delivering them.	
	☐ Yes.	Give specific information about them		
		Issuer name:		
		ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 401((k), 403(b), thrift savings accounts, or other pension or profit-sharing pla	ans
	Yes.	List each account separately.		
		Type of account:	Institution name:	
		401k	Merrill-Lynch	\$180.00
22.	Your s Exam _l ■ No	ples: Agreements with landlords, prepaid re	le so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications companie Institution name or individual:	s, or others
23.		ties (A contract for a periodic payment of n	noney to you, either for life or for a number of years)	
	■ No	loguer name and deceriation		
	☐ Yes.	Issuer name and descriptio	ni.	
24.	26 U.S.	ts in an education IRA, in an account in C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition progr	am.
	■ No	Institution name and descri	iption. Separately file the records of any interests.11 U.S.C. § 521(c):	
	☐ Yes.	Institution name and descri	public Separately life the records of any interests. IT 0.3.6. § 321(6).	
25.	Trusts ■ No	, equitable or future interests in propert	ty (other than anything listed in line 1), and rights or powers exerc	isable for your benefit
	☐ Yes.	Give specific information about them		
		s, copyrights, trademarks, trade secrets ples: Internet domain names, websites, pro	s, and other intellectual property occeds from royalties and licensing agreements	
		Give specific information about them		
		ses, franchises, and other general intangules: Building permits, exclusive licenses, of	gibles cooperative association holdings, liquor licenses, professional licenses	
		Give specific information about them		
M	onev or	property owed to you?		Current value of the
.71	cy 01	property office to you:		portion you own?

Official Form 106A/B Schedule A/B: Property page 5

claims or exemptions.

Case 17-10273 Doc 1 Filed 06/26/17 Entered 06/26/17 15:02:45 Desc Main Page 15 of 53 Document **Matthew Scott Webb** Debtor 1 Debtor 2 **Crystal Gail Webb** Case number (if known) 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$540.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

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Debtor Debtor			————	Case number (if known)	
	you have other property of any kind you did	•			
	•	•			
	Yes. Give specific information				
54. A	add the dollar value of all of your entries from	Part 7. Write that	number here		\$0.00
Part 8:	List the Totals of Each Part of this Form				
55. P	art 1: Total real estate, line 2				\$146,640.00
56. P	art 2: Total vehicles, line 5		\$15,575.00		
57. P	art 3: Total personal and household items, lin	ne 15	\$3,500.00		
58. P	art 4: Total financial assets, line 36		\$540.00		
59. P	art 5: Total business-related property, line 45		\$0.00		
60. P	art 6: Total farm- and fishing-related property	, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54	+	\$0.00		
62. T	otal personal property. Add lines 56 through 61	I	\$19,615.00	Copy personal property total	\$19,615.00
63. T	otal of all property on Schedule A/B. Add line	55 + line 62			\$166.255.00

Official Form 106A/B Schedule A/B: Property page 7

	Cas	se 17-10273 Doc 1	Filed 06/26/1 Document		Entered 06/26/17 15:02 Page 17 of 53	2:45	Desc Main			
Fil	l in this informa	ation to identify your case:	DOCHINE		70E 17 01 33					
De	ebtor 1	Matthew Scott Webb								
D-	shtor O	First Name N	liddle Name	L	Last Name					
	ebtor 2 ouse if, filing)	First Name M	liddle Name	L	_ast Name					
Un	nited States Ban	kruptcy Court for the: WES	TERN DISTRICT OF N	IORTI	H CAROLINA					
Ca	ase number									
	znown)					ı	☐ Check if this is an amended filing			
\bigcirc	fficial For	m 106C								
			rty Vou Cla	im	as Evomnt		4/4.0			
<u> </u>	Criedule	: C: The Proper	ty fou Cla		i as Exempt		4/16			
the nee	property you list	ted on Schedule A/B: Property attach to this page as many co	(Official Form 106A/B)	as yo	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any	claim as	exempt. If more space is			
fun exe to t	ds—may be un emption to a pa he applicable s	limited in dollar amount. Hov rticular dollar amount and th statutory amount.	vever, if you claim an e value of the propert	exer	th aids, rights to receive certain b nption of 100% of fair market valu determined to exceed that amount	e under a	a law that limits the			
Pa	rt 1: Identify	the Property You Claim as E	xempt							
1.	Which set of e	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	You are clai	ming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	☐ You are clai	ming federal exemptions. 11	J.S.C. § 522(b)(2)							
2.	For any prope	rty you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
		n of the property and line on nat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific	laws that allow exemption			
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
De	btor 1 Exemp	otions Hollow Road Burnsville,				N.C.G	en. Stat. §			
	NC 28714 Y	ancey County	\$104,640.00		\$35,000.00	_	en. Stat. 9)1(a)(1)			
	3BR, 1 bath; Line from Sche	value shown is tax value edule A/B: 1.1	<u>.</u>		100% of fair market value, up to any applicable statutory limit					
		elet Cavalier LS 170000+	\$6,050.00		\$3,500.00	N.C. G	en. Stat. § 1C-1601(a)(3)			
	sunroof; and	locks, windows, d 2000 Mitsubishi			100% of fair market value, up to any applicable statutory limit					

refrigerator, stove, microwave, washer & dryer, misc. kitchen items, kitchen table, sofa, recliner, end table, queen bed, twin bed, toddler bed, 2 dressers, 2 chests of drawers, nightstand, armoire, air conditioner, gas grill, riding mower, misc. hand tool

currently not running; repair

estimate, \$500.00 Line from Schedule A/B: 3.1

Line from Schedule A/B: 6.1

Official Form 106C

\$2,400.00

N.C. Gen. Stat. § 1C-1601(a)(4)

\$1,200.00

100% of fair market value, up to

any applicable statutory limit

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
2 TVs, DVD player, X-box, laptop	\$600.00	•	\$300.00	N.C. Gen. Stat. § 1C-1601(a)(4
computer, printer, Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit	
clothing Line from Schedule A/B: 11.1	\$400.00		\$200.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line Hotti Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
wedding bands Line from Schedule A/B: 12.1	\$100.00		\$50.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line Hotti Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
joint checking & savings accounts: Wells Fargo	\$190.00		\$95.00	N.C. Gen. Stat. § 1-362
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
joint checking & savings accounts:	\$70.00		\$35.00	N.C. Gen. Stat. § 1-362
Union Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
401k: Merrill-Lynch Line from Schedule A/B: 21.1	\$180.00		\$180.00	N.C. Gen. Stat. § 1C-1601(a)(9)
Line from Schedule A/B: Z1.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No	3 years after that for ca	ises fi	·	
Yes. Did you acquire the property cover No	ed by the exemption wi	thin 1	,215 days before you filed this case	?

Yes

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Fil	ll in this inforn	nation to identify your	case:				
De	ebtor 1						
		First Name	Middle	Name	L	ast Name	
1	ebtor 2	Crystal Gail Webl					
(Sp	oouse if, filing)	First Name	Middle	Name	L	ast Name	
Ur	nited States Bar	nkruptcy Court for the:	WESTERI	N DISTRICT OF N	IORTH	H CAROLINA	
Ca	ase number						
(if k	known)						Check if this is an amended filing
O	fficial Fo	rm 106C					
_			operty	You Cla	aim	as Exempt	4/16
the nee cas	property you list eded, fill out and se number (if kn	sted on <i>Schedule A/B: F</i> d attach to this page as own).	Property (Offi many copies	cial Form 106A/B of <i>Part 2: Additio</i>) as yo nal Pa	our source, list the property that younge as necessary. On the top of an	for supplying correct information. Using u claim as exempt. If more space is y additional pages, write your name and
spe any fun exe	ecific dollar an y applicable st ids—may be u emption to a pa	nount as exempt. Alter atutory limit. Some exe nlimited in dollar amou	natively, yo emptions—: unt. Howeve	u may claim the such as those fo er, if you claim ar	full fai r heal n exen	ir market value of the property b th aids, rights to receive certain nption of 100% of fair market val	One way of doing so is to state a eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the nt, your exemption would be limited
Pa	art 1: Identif	y the Property You Cla	im as Exem	npt			
1		-			n if wa	our spouse is filing with you.	
١.	_		•	•	•	, ,	
	You are cla	aiming state and federal	nonbankrup	tcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are cla	aiming federal exemption	ns. 11 U.S.	C. § 522(b)(2)			
2.	For any prop	erty you list on Sched	ule A/B that	you claim as ex	empt,	fill in the information below.	
		on of the property and ling		rrent value of the rtion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
				py the value from hedule A/B	Che	eck only one box for each exemption.	
De	ebtor 2 Exem	ntions					
		olet Cavalier LS 170	+000	\$6,050.00		\$1,550.00	N.C. Gen. Stat. §
	miles	1		Ψ0,000.00	_		1C-1601(a)(3)
	sunroof; an Montero Sp currently no estimate, \$. locks, windows, d 2000 Mitsubishi ort, 160000+ miles, ot running; repair 500.00 edule A/B: 3.1			Ц	100% of fair market value, up to any applicable statutory limit	
		, stove, microwave,		\$2,400.00		\$1,200.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	kitchen tab table, quee bed, 2 dres nightstand,	ryer, misc. kitchen i le, sofa, recliner, en n bed, twin bed, tod sers, 2 chests of dra armoire, air conditi ling mower, misc. h	d dler awers, oner,			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

\$600.00

Line from Schedule A/B: 6.1

computer, printer, Line from Schedule A/B: 7.1

2 TVs, DVD player, X-box, laptop

N.C. Gen. Stat. § 1C-1601(a)(4)

\$300.00

100% of fair market value, up to any applicable statutory limit

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	clothing Line from Schedule A/B: 11.1	\$400.00		\$200.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	Ellie Holli Golloddie 702.			100% of fair market value, up to any applicable statutory limit	
	wedding bands Line from Schedule A/B: 12.1	\$100.00		\$50.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	Ellie Holli Gelledale PVB. 12.1			100% of fair market value, up to any applicable statutory limit	
	joint checking & savings accounts: Wells Fargo	\$190.00		\$95.00	N.C. Gen. Stat. § 1-362
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	joint checking & savings accounts: Local Government Federal Credit	\$70.00		\$35.00	N.C. Gen. Stat. § 1-362
	Union Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)
	■ No	,		•	,
	☐ Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

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			Document	Page 21	of 53		
Fill i	n this inform	nation to identify you	r case:				
Debt	or 1	Matthew Scott V	Vebb				
		First Name	Middle Name	Last Name		-	
Debt		Crystal Gail Wel					
(Spous	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Bar	kruptcy Court for the:	WESTERN DISTRICT OF NO	RTH CAROLII	NA		
0							
(if know	number					☐ Check	if this is an
`	,					_	led filing
							Ü
Offic	cial Form	<u> 106D</u>					
Sch	nedule	D: Creditors	Who Have Claims	Secure	d by Propert	V	12/15
			If two married people are filing togeth out, number the entries, and attach it				
	er (if known).					····· p-g, ······ , ···· ···	
1. Do a	any creditors	have claims secured by	your property?				
	☐ No. Check	this box and submit the	nis form to the court with your other	schedules. Y	ou have nothing else t	o report on this form.	
	Yes. Fill in	all of the information I	below.				
Part	1: List Al	I Secured Claims					
	<u> </u>		more than one secured claim, list the cre	aditor congrately	Column A	Column B	Column C
for ea	ich claim. If mo	ore than one creditor has	a particular claim, list the other creditor	s in Part 2. As	Amount of claim	Value of collateral	Unsecured
much	as possible, lis	st the claims in alphabetion	cal order according to the creditor's nam	ne.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.4	Local Gov	ernment Fed					,
2.1	Cr Union		Describe the property that secures	the claim:	\$11,465.00	\$9,425.00	\$2,040.00
	Creditor's Name		2003 GMC Sierra 1500 17000	00+			
			miles 4 WD				
			As of the date you file, the claim is:	Check all that			
	PO Box 25	-	apply.	Oncok un triat			
-	Raleigh, N		Contingent				
	Number, Street,	City, State & Zip Code	Unliquidated				
Who	owes the del	bt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_	ebtor 1 only		☐ An agreement you made (such as	mortgage or sec	cured		
_	ebtor 2 only		car loan)				
_	ebtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
_		e debtors and another	☐ Judgment lien from a lawsuit				
□ с	heck if this cla	aim relates to a	Other (including a right to offset)	Non-Purch	ase Money Securi	ty	
С	ommunity del	ot	, ,				
Date	debt was incu	ırred	Last 4 digits of account num	ber			
2.2	Mitchell C	redit Co	Describe the property that secures	the claim:	\$1,000.00	\$6,050.00	\$0.00
,	Creditor's Name		2002 Chevrolet Cavalier LS	170000+			
			miles				
			4 door, pwr. locks, windows sunroof; and 2000 Mitsubis				
			Montero Sport, 160000+ mil				
			currently not running; repai				
			estimate, \$500.00				
	155 Oak A	venue	As of the date you file, the claim is: apply.	Check all that			
	Spruce Pi	ne, NC 28777	☐ Contingent				
	Number, Street,	City, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
		bt? Check one.	Nature of lien. Check all that apply.				
	ebtor 1 only		An agreement you made (such as car loan)	mortgage or sec	cured		
	ebtor 2 only			ohanio'a liaa\			
■ De	ebtor 1 and De	ptor 2 only	☐ Statutory lien (such as tax lien, me	conamics nem)			

Official Form 106D

 \square At least one of the debtors and another \square Judgment lien from a lawsuit

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Debtor 1 Matthew Scott Webb		(Case number (_{if know})		
First Name Middle N	ame Last Name	_	-		
Debtor 2 Crystal Gail Webb		<u></u>			
First Name Middle N	lame Last Name				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Non-Purcha	ase Money Security		
Date debt was incurred	Last 4 digits of account num	ıber			
2.3 Wells Fargo Home Mortgage	Describe the property that secures	the claim:	\$51,500.00	\$104,640.00	\$51,500.00
Correspondence PO Box 10335 Des Moines, IA 50306-0335	702 Presnell Hollow Road Burnsville, NC 28714 Yance County 3BR, 1 bath; value shown is value As of the date you file, the claim is: apply. ☐ Contingent	s tax			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Nature of lien. Check all that apply. An agreement you made (such as car loan)	mortgage or sect	ured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Deed of Tru	ıst		
Date debt was incurred	Last 4 digits of account num	nber <u>0001</u>			
Add the dollar value of your entries in O If this is the last page of your form, add Write that number here: Part 2: List Others to Be Notified for	the dollar value totals from all pages		\$63,965.00 \$63,965.00		
Use this page only if you have others to be trying to collect from you for a debt you of than one creditor for any of the debts that debts in Part 1, do not fill out or submit the	owe to someone else, list the creditor t you listed in Part 1, list the addition	in Part 1, and th	nen list the collection agenc	y here. Similarly, if yo	ou have more
Name, Number, Street, City, State & Andrew Vining Shapiro & Ingle LLP 10130 Perimeter Pkwy Ste	•		th line in Part 1 did you enter t	he creditor? 2.3	

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			Document	Page 23 of 5	33		
Fill i	n this inforr	nation to identify your case	:				
Debt	or 1	Matthew Scott Webb					
		First Name	Middle Name	Last Name			
Debt	or 2	Crystal Gail Webb					
(Spou	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Ba	nkruptcy Court for the: WE	ESTERN DISTRICT OF NO	RTH CAROLINA			
Case	number						
(if kno	wn)					☐ Check amend	if this is an ed filing
Sched Sched Sched left. An name Part	complete and recutory confule G: Executure United B: Credit that the Confunction and case nur	n 106E/F I/F: Creditors Who I accurate as possible. Use Paracts or unexpired leases that of tory Contracts and Unexpired Leases Who Have Claims Secured tinuation Page to this page. If ynber (if known). II of Your PRIORITY Unsecurs have priority unsecured claimart 2.	t 1 for creditors with PRIORIT could result in a claim. Also Leases (Official Form 106G). I by Property. If more space is you have no information to re	TY claims and Part 2 fo list executory contract Do not include any cre needed, copy the Part	s on Schedule A/B: P ditors with partially s you need, fill it out, i	roperty (Official For ecured claims that a number the entries in	m 106A/B) and on ire listed in in the boxes on the
2. L id p	ist all of your dentify what ty ossible, list the	r priority unsecured claims. If a be of claim it is. If a claim has bott e claims in alphabetical order acc than one creditor holds a particula	h priority and nonpriority amour ording to the creditor's name. If	nts, list that claim here a f you have more than tw	nd show both priority a	nd nonpriority amoun	ts. As much as
(1	For an explana	ation of each type of claim, see the	e instructions for this form in the	e instruction booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1	Internal	Revenue Service	Last 4 digits of accou	ınt number	\$0.00	\$0.00	\$0.00
	•	editor's Name			_		·
	Attn Ba PO Box	nkruptcy	When was the debt in	ncurred?			
		7346 Iphia, PA 19101-7346					
		treet City State Zlp Code	As of the date you file	e, the claim is: Check a	all that apply		
	Who incurred	d the debt? Check one.	☐ Contingent				
	Debtor 1 c	only	☐ Unliquidated				
	Debtor 2 o	only	☐ Disputed				
	■ Debtor 1 a	and Debtor 2 only	Type of PRIORITY un	secured claim:			
	_	ne of the debtors and another	☐ Domestic support of	bbligations			
	☐ Check if t	his claim is for a community de	ebt Taxes and certain of	other debts you owe the	government		
		subject to offset?	_	personal injury while yo			
	■ No		Other Specify				

Notice Only

☐ Yes

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	Matthew Scott Webb Crystal Gail Webb	Case no	umber (if know)		
2.2 N (C Dept of Revenue	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
At Po	iority Creditor's Name ttn Bankruptcy O Box 1168 aleigh, NC 27602	When was the debt incurred?			
	umber Street City State ZIp Code	As of the date you file, the claim is: Check all	that apply		
Who i	incurred the debt? Check one.	☐ Contingent			
□ De	ebtor 1 only	☐ Unliquidated			
☐ De	ebtor 2 only	□ Disputed			
■ De	ebtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	least one of the debtors and another	☐ Domestic support obligations			
□сн	heck if this claim is for a community debt	Taxes and certain other debts you owe the g	overnment		
Is the	claim subject to offset?	☐ Claims for death or personal injury while you	were intoxicated		
■ No	0	☐ Other. Specify			
☐ Ye	es	Notice Only			
Pri Y a	ancey Co Tax Collector iority Creditor's Name ancey Co Courthouse	Last 4 digits of account number When was the debt incurred?	\$320.00	\$320.00	\$0.00
	10 Town Square urnsville, NC 28714				
	umber Street City State Zlp Code	As of the date you file, the claim is: Check all	that apply		
Who i	incurred the debt? Check one.	☐ Contingent			
■ De	ebtor 1 only	☐ Unliquidated			
☐ De	ebtor 2 only	☐ Disputed			
□ De	ebtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At	least one of the debtors and another	☐ Domestic support obligations			
□сн	heck if this claim is for a community debt	■ Taxes and certain other debts you owe the g	overnment		
	claim subject to offset?	☐ Claims for death or personal injury while you	were intoxicated		
■ No	0	☐ Other. Specify			
☐ Ye	es	2016 property taxes			
Part 2:	List All of Your NONPRIORITY Unsecu	ıred Claims			
3. Do any	creditors have nonpriority unsecured claim	ns against you?			
□ No.	You have nothing to report in this part. Submit	this form to the court with your other schedules.			
■ Yes	S.				
		e alphabetical order of the creditor who holds ea laim. For each claim listed, identify what type of cla			

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Matthew Scott Webb

Debto	or 2 Crystal Gail Webb	Case number (if know)	
4.1	Appalachian Eye Associates OD, PA	Last 4 digits of account number	\$142.00
	Nonpriority Creditor's Name 54 Hill St Spruce Pine, NC 28777	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical debt	
4.2	Blue Ridge Medical Ctr Nonpriority Creditor's Name	Last 4 digits of account number	\$63.00
	800 Medical Campus Dr Burnsville, NC 28714	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical debt	
4.3	Blue Ridge Reg Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$516.00
	PO Drawer 9 Spruce Pine, NC 28777	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify medical debt	

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4.4 Mission Hospitals	Last 4 digits of account number	\$51.00
Nonpriority Creditor's Name Attn Bankruptcy 50 Schenck Pkwy	When was the debt incurred?	
Asheville, NC 28803 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical debt	
4.5 Webbank/Fingerhut	Last 4 digits of account number 7560	\$267.00
Nonpriority Creditor's Name 6250 Ridgewood Road	When was the debt incurred?	
Saint Cloud, MN 56303 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Part 3: List Others to Be Notified About a	Debt That You Already Listed	
is trying to collect from you for a debt you owe to	ed about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For examp o someone else, list the original creditor in Parts 1 or 2, then list the collection agency that you listed in Parts 1 or 2, list the additional creditors here. If you do not have add ut or submit this page.	here. Similarly, if you
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Bull City Financial Solutions 2609 N Duke St Ste 500	Line 4.3 of (Check one):	
Durham, NC 27704	Part 2: Creditors with Nonpriority Unsecured Last 4 digits of account number	Claims
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
I C Systems	Line 4.1 of (<i>Check one</i>):	ms
PO Box 64378	Part 2: Creditors with Nonpriority Unsecured	Claims
St Paul, MN 55164-0378	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Professional Med Adjustment Bureau	Line 4.4 of (Check one):	
4135 Southstream Blvd Ste 400 Charlotte, NC 28217	■ Part 2: Creditors with Nonpriority Unsecured	uaims
	Last 4 digits of account number	
Name and Address Professional Med Adjustment Bureau	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Clair	ms

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Debtor 1 Matthew Scott Webb Crystal Gail Webb		Case number (if know)
4135 Southstream Blvd Ste 400 Charlotte, NC 28217		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
US Attorneys Office	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
Federal Courthouse Rm 233 100 Otis Street Asheville, NC 28801-2688		☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	220.00
TOTT FAIL I		•		3	320.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	320.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	1,039.00
	6i.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	1.039.00

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		17(1(1111)	III PAU E 70 ULOS	
Fill in this infor	mation to identify your	case:		
Debtor 1	Matthew Scott W	ebb		
	First Name	Middle Name	Last Name	
Debtor 2	Crystal Gail Web	b		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	F NORTH CAROLINA	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		State	ZIF Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	City		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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		Documei	nt Page 29 o	of 53	
Fill in this i	information to identify you	r case:			
Debtor 1	Matthew Scott V	Vebb			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Crystal Gail Web First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	WESTERN DISTRICT OF	NORTH CAROLINA		
Case numb (if known)	per			☐ Check if this is an amended filing	
	Form 106H ule H: Your Cod	debtors		12	2/15
people are f fill it out, an	filing together, both are eq	ually responsible for supple boxes on the left. Attach	ying correct informat	ns complete and accurate as possible. If two marrie tion. If more space is needed, copy the Additional I to this page. On the top of any Additional Pages, w	Page,
1. Do y	ou have any codebtors? (I	f you are filing a joint case, de	o not list either spouse	as a codebtor.	
■ No □ Yes					
Arizona No.	a, California, Idaho, Louisiana Go to line 3.	a, Nevada, New Mexico, Pue	rto Rico, Texas, Washi	ry? (Community property states and territories include ington, and Wisconsin.)	
3. In Colu in line Form 1	ımn 1, list all of your codeb 2 again as a codebtor only	if that person is a guarante	pouse as a codebtor or or cosigner. Make	r if your spouse is filing with you. List the person s sure you have listed the creditor on Schedule D (C 06G). Use Schedule D, Schedule E/F, or Schedule C	Official
	Column 1: Your codebtor lame, Number, Street, City, State and	ZIP Code		Column 2: The creditor to whom you owe the check all schedules that apply:	debt
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				Cabadula D. lina	
	Name			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	Dity	State	ZIP Code		

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Fill	in this information	to identify your ca	ase:						
De	btor 1	Matthew Sco	ott Webb						
	btor 2 buse, if filing)	Crystal Gail	Webb						
Uni	ited States Bankru	ptcy Court for the	: WESTERN DISTRICT	OF NO	RTH CAROLINA				
	se number			-			ck if this is: An amended A supplemer I 3 income as	nt showing p	postpetition chapter wing date:
0	fficial Form	<u> 106l</u>				ī	MM / DD/ YY	/YY	
S	chedule I:	Your Inc	ome						12/15
spo atta Pa	use. If you are se ch a separate she	parated and you eet to this form. be Employment	are married and not filir r spouse is not filing w On the top of any additi	ith you,	do not include informat	ion abou	t your spou	ıse. If more	space is needed,
1.	Fill in your emp information.	loyment		Debto	or 1		Debtor 2	or non-filin	g spouse
	If you have more		Employment status	■ Em	ployed		■ Employ	/ed	
	attach a separate information abou	1 0	Employment status	□ No	t employed		☐ Not em	ployed	
	employers.		Occupation	fabrio	cator		dept ma	nager	
	Include part-time self-employed w		Employer's name	Altec			Wal Mar	t	
	Occupation may or homemaker, i		Employer's address		River School Road sville, NC 28714		Hall Tow Spruce F	n Road Pine, NC 2	28777
			How long employed t	here?	4 months		10	months	
Pa	rt 2: Give De	etails About Mor	nthly Income						
	imate monthly incuse unless you are		ate you file this form. If	you have	e nothing to report for any	/ line, writ	e \$0 in the s	space. Includ	de your non-filing
	ou or your non-filing e space, attach a s		ore than one employer, co this form.	mbine th	ne information for all emp	loyers for	that person	on the lines	s below. If you need
						For De	btor 1	For Debto	
2.			ry, and commissions (be calculate what the monthle			5 4	1,036.33	\$	1,545.53

3.

+\$

0.00

1,545.53

0.00

4,036.33

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

3.

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	tor 1 tor 2	Matthew Scott Webb Crystal Gail Webb	-		Case	e number (<i>if kno</i>	wn)				
					Fo	r Debtor 1			Debtor :		
	Cop	y line 4 here	4.		\$_	4,036.	33	\$		545.53	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	777.	01	\$:	247.28	
	5b.	Mandatory contributions for retirement plans	5k	٥.	\$		00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	С.	\$	121.	12	\$		0.00	1
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.	00	\$		0.00	
	5e.	Insurance	56		\$_	282.		\$		0.00	_
	5f.	Domestic support obligations	5f		\$_		00	\$		0.00	_
	5g.	Union dues	50	-	\$_		00	\$		0.00	_
	5h.	Other deductions. Specify: uniforms	_	Դ.+	. –		<u>50</u>	+ \$		0.00	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,200.	29	\$:	247.28	<u> </u> -
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,836.	04	\$	1,	298.25	<u>-</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						•			
	O.L.	monthly net income.	88		\$_		00	\$		0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8k 8d		\$_ \$		00	\$ \$		0.00	_
	8d.	Unemployment compensation	80		\$ \$		00	\$ 		0.00	_
	8e.	Social Security	86		\$		00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income		f.	\$_ \$_	0.	00 00	\$ \$		0.00	_
	8h.	Other monthly income. Specify:		n.+	\$			+ \$		0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.	00	\$		0.0	0
10	Cal	aulate monthly income. Add line 7 u line 0	10	¢.		2 926 04	. 🕝	4.2	00.25	_ 6	4 4 2 4 2 0
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		2,836.04	- JΨ.	1,2	98.25	= \$ _	4,134.29
11.	State Included Other	te all other regular contributions to the expenses that you list in Schedule dude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	dep			, ,		•	chedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	4,134.29
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							Combi month	ned ly income
	П	Yes. Explain:									

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						_		
Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Matthew Sco	tt Webb				eck if this is:	
	otor 2 ouse, if filing)	Crystal Gail	Webb				An amended filing A supplement show 13 expenses as of	wing postpetition chapter the following date:
Unit	ted States Bankr	uptcy Court for the	: WESTE	ERN DISTRICT OF NORTI	H CAROLINA		MM / DD / YYYY	
	se number							
		rm 106J						
S	chedule	J: Your l	Exper	nses				12/15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par	t 1: Descr	ibe Your House	hold					
1.	Is this a joir ☐ No. Go to							
	■ Yes. Doe	s Debtor 2 live i	in a separ	ate household?				
	■ N □ Y	-	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Deb	otor 2.	
2.	Do vou have	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		2	□ No ■ Yes
					Son		12	□ No ■ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	expenses o	oenses include f people other tl d your depende	han $_{m \sqcap}$	No Yes				
Est	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	0.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	88.00
	•	rty, homeowner's	-			4b.	\$	70.00
				upkeep expenses		4c.	·	80.00
5.		owner's associat nortgage payme		dominium dues our residence, such as ho	me equity loans	4d. 5.		0.00
			,	,		-		

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		tthew Scott Webb vstal Gail Webb	Casa num	hor (if known)	
Dec	ioi z <u>Cr</u>	Stal Gall Webb	Jase Hull	ber (if known)	
6.	Utilities:				
	6a. Ele	ctricity, heat, natural gas	6a.	\$	260.00
	6b. Wa	ter, sewer, garbage collection	6b.	\$	0.00
	6c. Tele	ephone, cell phone, Internet, satellite, and cable services	6c.	\$	280.00
	6d. Oth	er. Specify:	6d.	\$	0.00
7.	Food and	housekeeping supplies	7.	\$	950.00
8.	Childcare	and children's education costs	8.	\$	280.00
9.	Clothing,	laundry, and dry cleaning	9.	\$	100.00
10.		care products and services	10.	\$	15.00
11.		nd dental expenses	11.	\$	100.00
12.		tation. Include gas, maintenance, bus or train fare.	12.	¢	600.00
12		lude car payments.	13.		
		ment, clubs, recreation, newspapers, magazines, and books e contributions and religious donations	13. 14.	·	0.00
14.		•	14.	Φ	0.00
15.	Insurance	lude insurance deducted from your pay or included in lines 4 or 20.			
		insurance	15a.	\$	0.00
		alth insurance	15b.	· ·	0.00
	15c. Veh	icle insurance	15c.	· · · · · · · · · · · · · · · · · · ·	70.00
		er insurance. Specify:	15d.	·	0.00
16.		onot include taxes deducted from your pay or included in lines 4 or 20.			0.00
	Specify:	vehicle taxes, tags, inspections	16.	\$	15.00
17.		nt or lease payments:			
		payments for Vehicle 1	17a.	\$	0.00
	17b. Car	payments for Vehicle 2	17b.	\$	0.00
	17c. Oth	er. Specify:	17c.	\$	0.00
	17d. Oth	er. Specify:	17d.	\$	0.00
18.		ments of alimony, maintenance, and support that you did not report as			0.00
	deducted	from your pay on line 5, Schedule I, Your Income (Official Form 106l).	18.	·	
19.		ments you make to support others who do not live with you.	40	\$	0.00
20	Specify:	I property expenses not included in lines 4 or 5 of this form or on Sched	19.	arr Incomo	
20.		tgages on other property	20a.		0.00
		al estate taxes	20b.	· -	0.00
		perty, homeowner's, or renter's insurance	20c.	· :	0.00
		ntenance, repair, and upkeep expenses	20d.	· · · · · · · · · · · · · · · · · · ·	0.00
		neowner's association or condominium dues	20a.	·	0.00
21	Other: Sp			+\$	187.00
21.	Othion op	pet 1000, veterinary expenses		ΙΨ.	107.00
22.		your monthly expenses			
		ines 4 through 21.		\$	3,095.00
	22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add I	ine 22a and 22b. The result is your monthly expenses.		\$	3,095.00
23	Calculate	your monthly net income.			
20.		by line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,134.29
		by your monthly expenses from line 22c above.	23b.	·	3,095.00
	200. 00	y your monthly expenses nom line 225 above.	200.		3,033.00
	23c. Sub	stract your monthly expenses from your monthly income.			
		result is your monthly net income.	23c.	\$	1,039.29
		,		-	
24.		spect an increase or decrease in your expenses within the year after you			
		e, do you expect to finish paying for your car loan within the year or do you expect your r n to the terms of your mortgage?	nortgage	payment to increa	se or decrease because of a
	_	To the terms of your mongage:			
	■ No.	Fundain have			
	Yes.	Explain here:			

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Fill in this info	rmation to identify your	case:					
Debtor 1	Matthew Scott W	ebb					
	First Name	Middle Name	Las	t Name			
Debtor 2	Crystal Gail Web						
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States B	Sankruptcy Court for the:	WESTERN DISTRICT	OF NORTH	CAROLINA			
Case number							
(if known)						☐ Check if this	is an
						amended fili	ng
Official For							
Declara	tion About a	an Individua	I Debte	or's Sche	dules		12/15
If two married p	people are filing together	r, both are equally respo	onsible for s	upplying correct i	information.		
You must file th	nis form whenever you fi	ile hankruntov schedule	s or amende	ed schedules. Mak	king a false stat	ement, concealing pro	nerty, or
	ey or property by fraud in						
years, or both.	18 U.S.C. §§ 152, 1341, 1	1519, and 3571.			-	-	-
e:	m Delevi						
Sig	gn Below						
Did you n	ay or agree to pay some	one who is NOT an atto	rnev to heln	vou fill out bankr	runtcy forms?		
Dia you p	ay or agree to pay some	one who is itel an alle	mey to neip	you mi out bank	uptoy forms.		
■ No							
☐ Yes.	Name of person				Attach Ban	kruptcy Petition Prepare	r's Notice,
_	•				—— Declaration	n, and Signature (Official	Form 119)
Under pen	alty of perjury, I declare	that I have read the sun	nmary and s	chedules filed wit	th this declarati	on and	
	re true and correct.						
V /-/ 84-	O W-bb		v	/-/ 0	1 1A/ - I- I-		
	etthew Scott Webb ew Scott Webb		^	/s/ Crystal Gail Wo			
	ure of Debtor 1			Signature of Debt			
- 3							
Date	June 26, 2017			Date June 26,	, 2017		

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Fill	in this infor	mation to identify you	case:								
Debtor 1		Matthew Scott Webb									
	_	First Name	Middle Name	Last Name							
	tor 2 use if, filing)	Crystal Gail Web	Middle Name	Last Name							
		and with the Court for the	WESTERN DISTRICT O	E NODTH CAROLINA							
Unit	eu States Di	ankruptcy Court for the:	WESTERN DISTRICT O	F NORTH CAROLINA							
Cas (if kno	e number own)				_	Check if this is an mended filing					
		orm 107 t of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/16					
infor num	mation. If r ber (if know	more space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you						
Pari			rital Status and Where Yo	u Lived Before		-					
1.	wnat is you	ur current marital statu	S?								
	■ Married Not ma										
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?							
	■ No □ Yes. Li	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 P	rior Address:	Dates Debtor 1 Debtor 2 Prior Address: lived there		ldress:	Dates Debtor 2 lived there					
					ity property state or territory ico, Texas, Washington and W						
	■ No										
	☐ Yes. M	lake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	Official Form 106H).							
Par	Expla	ain the Sources of You	r Income								
	Fill in the to	tal amount of income you	u received from all jobs and	ng a business during this ye all businesses, including part ve together, list it only once ur		ndar years?					
	□ No										
	Yes. F	ill in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
			■ Wages, commissions, bonuses, tips	\$14,072.00	■ Wages, commissions, bonuses, tips	\$8,900.00					
			☐ Operating a business		☐ Operating a business						

Official Form 107

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Matthew Scott Webb Debtor 1 Debtor 2 **Crystal Gail Webb** Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$30,430.00 \$4,291.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$40,033.00 \$0.00 For the calendar year before that: ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe **Local Government Fed Cr Union** March, April, May, \$807.00 \$11.465.00 ☐ Mortgage PO Box 25279 2017 ■ Car Raleigh, NC 27611 ☐ Credit Card ☐ Loan Repayment

☐ Suppliers or vendors

□ Other

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Deb	otor 2 Crystal Gail Webb		Cas	e number (if known)	
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupter insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on	account of a d	ebt that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Par	rt 4: Identify Legal Actions, Repossession	ns. and Foreclosures	P			
9.	Within 1 year before you filed for bankrupt: List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	In the matter of the foreclosure of a deed of trust by Matthew Scott Webb dated July 17, 2001, recorded in Book 375, page 571, Yancey County Public Registry 17 SP 35	foreclosure	General Court Justice-Disctric Town Square Main Street Burnsville, NC	ct Court	■ Pending □ On appe □ Conclud	eal
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below. No. Go to line 11.		rty repossessed, f	oreclosed, garn	ished, attached	d, seized, or levied?
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date	•	Value of the property
Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amoun accounts or refuse to make a payment because you owed a debt? No						amounts from your
	☐ Yes. Fill in the details. Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
				take	n	
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		rty in the possess	ion of an assign	ee for the bend	efit of creditors, a

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	otor 1 otor 2	Matthew Scott Webb Crystal Gail Webb		Case number	(if known)	
Par	t 5:	List Certain Gifts and Contribution	ıs			
13.	= 1	No	uptcy,	did you give any gifts with a total value of more	than \$600 per person	?
	Gifts	Yes. Fill in the details for each gift. s with a total value of more than \$60 person	00	Describe the gifts	Dates you gave the gifts	Value
		son to Whom You Gave the Gift and ress:				
14.	_	n 2 years before you filed for bank r No	uptcy,	did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
		Yes. Fill in the details for each gift or c	ontribu	ition.		
	more	s or contributions to charities that t e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses				
5.	or ga	mbling? No Yes. Fill in the details.		r since you filed for bankruptcy, did you lose any		
		cribe the property you lost and the loss occurred	Includ	ribe any insurance coverage for the loss le the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfers	s			
16.	Includ	ulted about seeking bankruptcy or place any attorneys, bankruptcy petition p	prepar	lid you or anyone else acting on your behalf pay ing a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	Pers Add	Yes. Fill in the details. son Who Was Paid ress		Description and value of any property transferred	Date payment or transfer was	Amount of payment
		ill or website address son Who Made the Payment, if Not Y	ou/		made	
	96 C	terfly Financial Education Inc Dak Creek Drive yton, NC 27520			June, 2017	\$37.00
	274	nard & Moore PLLC Merrimon Avenue eville, NC 28801			June, 2017	\$653.00
17.	prom		ditors o	did you or anyone else acting on your behalf pay or to make payments to your creditors?	or transfer any prope	rty to anyone who
	= 1	No				
		Yes. Fill in the details.				
	Pers Add	on Who Was Paid ress		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

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Matthew Scott Webb Debtor 2 **Crystal Gail Webb**

Case number (if known)

	transferred in the ordinary course of your bust Include both outright transfers and transfers mad include gifts and transfers that you have already No	de as security (such as t	the granting of a s	ecurity interest or mortgage on your	property). Do not			
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made			
	Person's relationship to you			paid in exchange				
	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-protein No		ny property to a s	elf-settled trust or similar device o	f which you are a			
	Yes. Fill in the details.							
	Name of trust	Description and v	value of the prope	erty transferred	Date Transfer was made			
Par	8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	t Boxes, and Sto	rage Units				
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accou	nts; certificates o	of deposit; shares in banks, credit	, ,			
	Yes. Fill in the details.							
	Name of Financial Institution and	Last 4 digits of account number	Type of accour instrument	nt or Date account was closed, sold, moved, or	Last balance before closing or transfer			
				transferred				
	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before you filed for bankruptcy	/ ?			
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?			
Pari	9: Identify Property You Hold or Control for	or Someone Else						
	Do you hold or control any property that som for someone.	eone else owns? Incl	ude any property	you borrowed from, are storing fo	or, or hold in trust			
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value			
Par	10: Give Details About Environmental Infor	mation						

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

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Debtor 1 Matthew Scott Webb
Debtor 2 Crystal Gail Webb

regulations controlling the cleanup of these substances, wastes, or material.

Case number (if known)

	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	ort a	ll notices, releases, and proceedings th	at you know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
		No						
		Yes. Fill in the details.						
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of	fany release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Hav		ministrative proceeding under any envir	conmental law? Include settlements	and orders.			
		No Yes. Fill in the details.						
	Cas	se Title	Court or agency	Nature of the case	Status of the			
	Cas	se Number	Name Address (Number, Street, City, State and ZIP Code)		case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business					
27.	With	nin 4 years before you filed for bankrup	tcy, did you own a business or have any	y of the following connections to any	y business?			
		lacksquare A sole proprietor or self-employed in	in a trade, profession, or other activity,	either full-time or part-time				
		☐ A member of a limited liability comp	pany (LLC) or limited liability partnershi	p (LLP)				
		☐ A partner in a partnership						
		☐ An officer, director, or managing executive of a corporation						
		☐ An owner of at least 5% of the voting or equity securities of a corporation						
	■ No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fil	I in the details below for each business.					
		siness Name dress	Describe the nature of the business	Employer Identification numbe Do not include Social Security				
		nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	number of frint.			
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, did you give a financial statement to		ude all financial			
		No						
		Yes. Fill in the details below.						
		me dress nber, Street, City, State and ZIP Code)	Date Issued					
D	Derek O. Circa Delays							

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

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Matthew Scott Webb Debtor 2 **Crystal Gail Webb** Case number (if known) with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Matthew Scott Webb /s/ Crystal Gail Webb **Matthew Scott Webb Crystal Gail Webb** Signature of Debtor 1 Signature of Debtor 2 Date Date June 26, 2017 June 26, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inforn	Fill in this information to identify your case:					
Debtor 1	Matthew Scott Webb	<u> </u>				
Debtor 2 (Spouse, if filing)	Crystal Gail Webb					
United States Bankruptcy Court for the:		Western District of North Carolina				
Case number (if known)						

Check	Check as directed in lines 17 and 21:					
1	According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 1,379.03 2,517.83 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Crystal Gail Webb Debtor 2 Case number (if known) Column B Column A Debtor 2 or Debtor 1 non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 0.00 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for 2.517.83 1,379.03 3,896.86 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 3,896.86 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 Copy here=> 3,896.86 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 3.896.86 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 46,762.32 15b. The result is your current monthly income for the year for this part of the form.

Matthew Scott Webb

Debtor 1

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Crystal Gail Webb Debtor 2 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. NC 4 16b. Fill in the number of people in your household. 72.830.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 3.896.86 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 3,896.86 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 3,896.86 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 \$ 46.762.32 20b. The result is your current monthly income for the year for this part of the form 72,830.00 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4. The commitment period is 5 years. Go to Part 4. Part 4: Sian Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Matthew Scott Webb X /s/ Crystal Gail Webb **Matthew Scott Webb Crystal Gail Webb** Signature of Debtor 1 Signature of Debtor 2 Date June 26, 2017 Date June 26, 2017 MM / DD / YYYY MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Matthew Scott Webb

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-10273 Doc 1 Filed 06/26/17 Entered 06/26/17 15:02:45 Desc Main Document Page 49 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of North Carolina

In re	Matthew Scott Webb Crystal Gail Webb		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPEN			. ,
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, f or in connection with the ban	or agreed to be paid kruptcy case is as fol	to me, for services rendered or to
	For legal services, I have agreed to accept			4,500.00
	Prior to the filing of this statement I have received			653.00
	Balance Due		\$	3,847.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to ren	der legal service for all aspect	s of the bankruptcy c	ase, including:
	a. Analysis of the debtor's financial situation, and renderb. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of creditord. [Other provisions as needed]	ment of affairs and plan which	may be required;	
6.	By agreement with the debtor(s), the above-disclosed fee conversions, adversary proceedings and			
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
J	une 26, 2017	/s/ T. Bentley Leo		
	Pate ()	T. Bentley Leonal Signature of Attorne		
		Leonard & Moore	PLLC	
		274 Merrimon Av Asheville, NC 288		
		828-255-0456 Fa	x: 828-252-6469	
		bentleyleonard@	leonardandmoore	.com
		Name of law firm		

Local Form 3 September 2016

Debtor(s) Matthew Scott Webb & Crystal Gail Webb

DISCLOSURE TO DEBTOR(S) OF ATTORNEY'S FEE PROCEDURE FOR CHAPTER 13 CASES IN THE UNITED STATES BANKRUPTCY COURT FOR THE WESTERN DISTRICT OF NORTH CAROLINA

After consultation with the undersigned attorney, you have decided to file a petition for relief under Chapter 13 of the United States Bankruptcy Code. Accordingly, you are hereby given notice that pursuant to the Local Rules of the Bankruptcy Court, the base fee for a Chapter 13 case is established at \$4,500.00. Payment of all or part this fee may be included in your payments to the Chapter 13 Trustee. The attorney's services included in the base fee are those normally contemplated in a Chapter 13 case. They are as follows:

(a)	Providing the pre-filing notices required by the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005;	(g)	Reviewing the Motion of Trustee of Determination of Status of Claims in confirmed Plan;
(b)	Preparation and filing of your petition, schedules, supplemental local forms, Chapter 13 Plan and mailing matrix;	(h)	Maintaining custody and control of all case files with original documents for such periods as prescribed by law or Local Rule;
(c)	Circulating a copy of the Chapter 13 Plan to all creditors	(i)	Serving Orders on all affected parties;
(0)	and interested parties as reflected in the case matrix and service of amended Plan if appropriate;	(j)	Verifying your identity and social security number and furnishing to the Chapter 13 Trustee, your IDs, tax returns,
(d)	Drafting and mailing letters to you regarding your		and payment advices, if required;
	attendance at the §341 meeting of creditors, escrow of first money, and your other responsibilities;	(k)	Defending objections to confirmation of your Chapter 13 Plan filed by the Chapter 13 Trustee; and
(e) (f)	Preparing for and attending the §341 meeting of creditors; Reviewing the confirmation order and periodic case status reports from the Chapter 13 Trustee;	(1)	Preparing and filing Local Form 8 or Local Form 8HD.
	The base fee shall also include the following services to the exterepresentation:	ent they are re	equested or reasonably necessary for your effective
(a)	Preparing and filing proofs of claim on your behalf for your creditors;		insurance coverage or the lack thereof, warranties, possible credit disability, life insurance coverage and the like;
(b)	Drafting and filing objections to scheduled and	(1)	Obtaining and providing the Chapter 13 Trustee with
	unscheduled proofs of claim;		copies of documents relating to lien perfection issues, such
(c)	Assuming and rejecting unexpired leases and executory		as recorded deeds of trust, purchase money security
	contracts;		agreements and the like;
(d)	Preparing for and attending valuation hearings;	(m)	Drafting and mailing letters to creditors upon entry of
(e)	Motions to transfer venue;		discharge regarding lien releases, turnover of clear title
(f)	Conferring with you regarding obtaining post-petition credit where no formal application is ultimately filed;		certificates, cancellation of deeds of trust and judgments and the like;
(g)	Drafting motions to avoid liens pursuant to §522(f)	(n)	Drafting and mailing of certified letters to creditors
(h)	Calculating plan payment modifications, where no formal motion is ultimately filed;		regarding matters related to alleged violations of the automatic stay.
(i)	Responding to creditor contacts regarding plan terms, valuation of collateral, claim amounts and the like;	(o)	Drafting and mailing letters regarding voluntary turnover of property.
(j)	Responding to your contacts regarding job losses, changes	(p)	Reviewing documents in relation to the use or sale of
3 /	in your financial circumstances, address changes, and	47	collateral when no formal application is ultimately filed.
	advising the Court and the Chapter 13 Trustee of the same when appropriate;	(q)	Providing you with a list of answers to frequently asked questions and other routine communications with you
(k)	Communicating with you, to a degree that is reasonable,		during the pendency of the case.
	regarding mortgage payment defaults, lease defaults,	(r)	Requesting plan payoffs from the Chapter 13 Trustee
covered	In some Chapter 13 cases, legal services which are beyond those by the base fee. These "non-base" services include the following:		ontemplated must be performed. These legal services are not
(a) (b)	Abandonment of property post-confirmation; Motion for moratorium;	(h)	Stay violation litigation, including amounts paid as fees by the creditor or other parties;
(c)	Motion for authority to sell property;	(i)	Post-discharge injunction actions;
(d)	Motion to modify plan;	(j)	Adversary proceedings;
(e)	Motion to use cash collateral or to incur debt;	(k)	Motions to turn over property;
(f)	Defense of motions for relief from stay or co-debtor stay;	(1)	Conversions to Chapter 7;
(g)	Defense of motions to dismiss filed after confirmation of	(m)	Motions to substitute collateral; and
-	your plan;	(n)	Any other matter not covered by the base fee.

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For such "non-base" services you will be charged on the basis of attorney's time expended at the rate of \$300.00 per hour plus the amount of expenses incurred (such as court fees, travel, long distance telephone, photocopying, postage, etc.). Such "non-base" fees are chargeable only after the same are approved by the Bankruptcy Court. Except as set forth below, before any such fees are charged you will receive a copy of my motion filed in the Court requesting approval of any such "non-base" fees as well as a notice explaining your opportunity to object if you do not agree with the fee applied for. Any fees awarded for "non-base" services will be paid to the undersigned attorney from your payments to the Chapter 13 Trustee in the same way as payment of "base" fees. It is possible the "non-base" fees approved by the Court may cause your payment to the Chapter 13 Trustee to be increased or the term of your Chapter 13 plan extended. Whether or not a payment increase or an extension will be necessary depends upon the facts of your case. If a payment increase is necessary because of a court-approved "non-base" fee, the Chapter 13 Trustee will notify you of the amount of the increase.

In the Court's discretion, your attorney in a Chapter 13 proceeding may request, in open court, and without any other notice, "non-base" fees for the following services in amounts not exceeding those shown below. Without other notice, your attorney may also request [the actual expenses of filing fees and of notice to creditors.] OR [up to \$1.00 for each item noticed to creditors as expense for postage, copying, and envelopes. These fees may be adjusted (increased) by the Court at a later date, and, if so, those adjusted fees will then be charged.]

(a)	Defense of motion to dismiss	\$200		allowing substitute counsel specifies both the amount	
(b)	Motion to modify and order, including motion for	\$450		of the fee and whether the fee is paid direct by the	
	moratorium.			debtor or through the plan.	
(c)	Substitution of collateral	\$450	(j)	Preparation and filing of conduit mortgage claim	\$350
(d)	Prosecution or defense of motion for relief from	\$450		with recorded deed of trust, Official Bankruptcy Form	1
	stay or co-debtor stay and order.			B10A, and Local Form 14 (to be filed as an	
(e)	Motion for authority to sell property and order	\$450		administrative claim)	
(f)	Motion to obtain credit	\$450	(k)	Objection to proof of claim of Real Property Creditor	\$450
(g)	Permission from Chapter 13 trustee to obtain credit	\$200	(1)	Consent to an amended proof of claim in lieu of an	\$450
	(to be filed as an administrative)			objection to a motion to modify stay or to an amended	1
(h)	Motion to continue or impose the automatic stay	\$350		proof of claim where the debtor has failed to make	
(i)	When Substitute legal counsel is retained by a Chapt	er		post-petition payments	
	13 debtor, such substituted counsel is entitled to a		(m)	Motion to incur debt related to the approval of a	\$450
	presumptive base fee of \$500 without formal			loan modification with a real property creditor	
	application to the Court, provided that the Order		(n)	Motion to declare mortgage current	\$450

ACKNOWLEDGMENT

I hereby certify that I have read this notice and that I have received a copy of this notice.

Dated: 06/26/2017	/s/ Matthew Scott Web	Matthew Scott Webb		
		Debtor's Signature		
Dated: 06/26/2017	/s/ Crystal Gail Webb	Successive Signature		
		Spouse's Signature		
I hereby certify that I have reviewed this notice with the de	ebtor(s) and that the de	btor(s) have received a copy of this notice.		
Dated: 06/26/2017	/s/ T. Bentley Leonard			
	T. Bentley Leonard, Att	torney for Debtor(s)		

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United States Bankruptcy Court Western District of North Carolina

In re	Crystal Gail Webb			Case No.	
		Debtor(s)	Chapter	13	
	VERII	FICATION OF CREDITOR N	MATRIX		
The ab	ove-named Debtors hereby verify that	at the attached list of creditors is true and con	rrect to the best	of their knowledge.	
Date:	June 26, 2017	/s/ Matthew Scott Webb			
	Matthew Scott Webb				
		Signature of Debtor			
Date:	June 26, 2017	/s/ Crystal Gail Webb			
		Crystal Gail Webb			

Signature of Debtor

Matthew Scott Webb

Andrew VininGase 17-10273 Doc 1 Shapiro & Ingle LLP 10130 Perimeter Pkwy Ste 400 Charlotte, NC 28216 File the DG/26/12 Tever Entered 06/26/17 15:02:45 Desc Main A POBLIMENT Page 53 of 53 PO Box 1168 Raleigh, NC 27602

Appalachian Eye Associates OD, PA 54 Hill St Spruce Pine, NC 28777 Professional Med Adjustment Bureau 4135 Southstream Blvd Ste 400 Charlotte, NC 28217

Blue Ridge Medical Ctr 800 Medical Campus Dr Burnsville, NC 28714 US Attorneys Office Federal Courthouse Rm 233 100 Otis Street Asheville, NC 28801-2688

Blue Ridge Reg Hospital PO Drawer 9 Spruce Pine, NC 28777 Webbank/Fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303

Bull City Financial Solutions 2609 N Duke St Ste 500 Durham, NC 27704 Wells Fargo Home Mortgage Correspondence PO Box 10335 Des Moines, IA 50306-0335

I C Systems PO Box 64378 St Paul, MN 55164-0378 Yancey Co Tax Collector Yancey Co Courthouse 110 Town Square Burnsville, NC 28714

Internal Revenue Service Attn Bankruptcy PO Box 7346 Philadelphia, PA 19101-7346

Local Government Fed Cr Union PO Box 25279 Raleigh, NC 27611

Mission Hospitals Attn Bankruptcy 50 Schenck Pkwy Asheville, NC 28803

Mitchell Credit Co 155 Oak Avenue Spruce Pine, NC 28777